



CITY OF FREDERICKSBURG, VIRGINIA
2013 Farmers' Market Permit Application
Seasonal Permit (Reserved Space)

Permit # _____

All questions must be answered completely and appropriate signatures must be completed prior to consideration for a Farmers' Market Permit.

Name of Applicant: _____

Company name: _____

Name (s) of persons who will be representing your business at the market: _____

Farming Address of Applicant: _____

Mailing Address of Applicant (if different from D above): _____

E-mail Address: _____

Home Phone #: _____ Cell #: _____

County and Acreage of Farming Operation (s): _____

List Produce or Products grown/for sale at the Farmer's Market (Attach additional sheet, if necessary):

Type of space requested (Spaces are 12.5 feet - Check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> <u>Reserved Saturday Only</u> | <input type="checkbox"/> <u>Reserved Weekday (Sunday Through Friday)*</u> |
| <input type="checkbox"/> One Space (\$150 Fee) | <input type="checkbox"/> One Space (\$25 Fee for each day) |
| <input type="checkbox"/> Two Spaces (\$280 Fee) | <input type="checkbox"/> Two Spaces (\$35 Fee for each day) |
| <input type="checkbox"/> Three Spaces (\$400 Fee) | <input type="checkbox"/> Three Spaces (\$50 Fee for each day) |
| <input type="checkbox"/> Four Spaces (\$475 Fee) | <input type="checkbox"/> Four Spaces (\$70 Fee for each day) |

*If Sunday-Friday, check days to attend: ☐ Sun ☐ Mon ☐ Tues ☐ Wed ☐ Thur ☐ Fri

Total amount for Reserved Weekday is the number(s) of days times the fee for the number of spaces requested.

Total Fee: _____

If returning vendor from previous season, which space was assigned? Space # _____ ☐ N/A

How many seasons/years have you been a vendor at the Fredericksburg market? _____

Do you plan to sell baked goods? Yes ☐ No ☐ If "Yes," is your kitchen VDACS certified" Y or N ____

State Sales Tax Identification Number: _____

City Business License Number (Baked Goods Vendors only): _____

Application for Vendor's Permit and Parking Decal (**ONLY ONE DECAL PER APPLICANT**)

I certify that the above information is true and correct and that I am in compliance with all regulations as a result of my business interests, past & present (Federal, State & Local).

Signature

Date

TO: Farmers Market Manager, Department of Parks, Recreation, & Public Facilities,
408 Canal St., Fredericksburg, VA, 22401

I, the undersigned, as a Farmers Market Vendor of approved products, do hereby apply for a Farmers' Market Permit for calendar year 2013 to park my vehicle and sell my produce or other products at the Fredericksburg Farmers' Market in the 900 Block of Prince Edward Street and/or the 500 block of George Street.

I understand I am responsible to collect/remit sales tax to the Virginia Department of Taxation. **I have read the Farmers Market Rules and Regulations and understand that I must follow them. If I do not, I understand that I may be found guilty of a Class 4 Misdemeanor and my permit may be revoked.**

Information regarding my vehicle is as follows: Make _____

Model _____ Year _____ License Plate # _____

Signature of Applicant

Date

Printed Name of Applicant

Checks shall be payable to "**City of Fredericksburg - Farmer's Market**"

Approved by _____, Parks, Recreation & Public Facilities

Date _____

Vehicle Decal # _____

Reserved Space # _____

Form of payment _____